U.S. Department of Justice

United States Attorney
Western District of New York

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PRESS RELEASE

May 11, 2004

RE: UNITED STATES v. LAURIE L. HILL

UNITED STATES V. UPHILL MEDICAL ASSOCIATES, P.C.

United States Attorney Michael A. Battle announced today that Dr. Laurie L. Hill, age 53, a resident of Inglewood, Ontario and formerly of Amherst, New York, along with his corporation, Uphill Medical Associates, P.C. pled guilty today in federal court, before the Hon. Richard J. Arcara. Hill pled guilty to one count of making a false statement relating to a health care benefit, in violation Title 18 United States Code, Section 1035, which carries a maximum penalty of 5 years imprisonment, a fine of \$250,000.00, or both. Hill's corporation, Uphill Medical Associates, P.C., (Uphill) pled guilty to making false claims against the United States, in violation of Title 18, United States Code, Section 287 which carries a maximum penalty of 5 years imprisonment, a fine of \$500,000.00, or both. Hill will also surrender his medical license in New York State and be debarred from the United States Medicare program.

According to Assistant U.S. Attorneys John E. Rogowski and Richard D. Kaufman, who handled the prosecution of the case against Dr. Hill and his corporation, Hill had

offices in both the Town of Tonawanda and the City of North Tonawanda, which in July of 2001, were the subject of federal search warrants where thousands of medical records were seized. At the same time, the government was able to freeze numerous bank accounts and other property of Hill.

CONVICTION OF DR. LAURIE L. HILL

In court today, Dr. Hill admitted that from July 1, 1998 through July 10, 2001 he submitted numerous fraudulent claims to a private insurance carrier, Univera Healthcare (Univera), allowing him to obtain payment for diagnostic testing by falsely stating symptoms that his patients did not have. The defendant conceded that he falsified patient charts and files by indicating they were experiencing such symptoms as shortness of breath and chest pain when in fact, Hill knew they were not experiencing such symptoms.

Specifically, the defendant admitted that between June and October of 2000, he submitted claim forms to Univera for medical services he provided to two undercover Federal Bureau of Investigation (FBI) agents. On one of the FBI undercover agents claim forms he falsely stated that the patient was experiencing shortness of breath and aortic valve disorder, while with respect to the other undercover agent Hill falsely stated that his patient was experiencing shortness of breath and endocarditis. In fact, the defendant knew that such symptoms did not exist and created the false medical record in order for him to facilitate payment from Univera. The defendant acknowledged that he received \$842.57 from the insurance company because of these false statements.

CONVICTION OF UPHILL MEDICAL ASSOCIATES, P.C.

Dr. Hill's corporation, Uphill Medical Associates, P.C., also pled guilty and admitted that from at least July 1, 1998 through July 10, 2001, submitted numerous fraudulent claims to Medicare, the governmental health care insurer, allowing it to obtain payment for diagnostic testing by falsely stating symptoms that the corporation's patients did not have. Uphill conceded that it falsified patient charts and files by indicating that its patients were experiencing such symptoms as shortness of breath and chest pain, when in fact, the defendant knew they were not experiencing such symptoms.

Specifically and as an example, Uphill admitted that between May and June of 2000, it submitted claim forms to Medicare for medical services provided to one of their patients, wherein Uphill falsely stated that the patient was experiencing chest pain. In fact, Uphill knew that such symptoms did not exist and created the false medical record in order to facilitate payment from Medicare. Uphill acknowledged that it received \$5,238.35 from Medicare because of these false statements.

CIVIL LITIGATION

In a related civil settlement, both Hill and Uphill, agreed to reimburse Univera, Medicare, Health Now New York (Blue Cross, Blue Shield of Western New York) and Independent Health Association, over \$441,000.00 to settle other billing disputes during the years that HILL operated his medical practice in the Tonawandas. The reimbursement was partially funded by the monies frozen by the government early on in the investigation, while the balance of the reimbursement was paid by Hill himself. An additional \$51,321.25 was forfeited to the government as proceeds from Hill's illegal conduct.

The conviction and civil settlements were the culmination of an investigation conducted by the Western New York Health Care Fraud Task Force consisting of agents from the United States Department of Health and Human Services - Office of Inspector General, United States Postal Inspection Service, Federal Bureau of Investigation, Internal Revenue Service - Criminal Investigation Division, United States Department of Defense - Criminal Investigation Service, and the New York State Insurance Fraud Bureau.

Univera's assistance in identifying unusually high billing patterns from Hill and Uphill for certain diagnostic testing, namely, Nuclear Stress Tests, which led law enforcement to initiate the investigation. Battle affirmed that this case is the perfect example of how law enforcement and the private sector can work together to identify those instances of health care fraud that if not eradicated, costs every member of society thousands of dollars.

The sentencing in this case is scheduled for September 8, 2004, at 12:30 p.m. before Judge Arcara.

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